

DEPARTMENT OF CHARITABLE GAMING STOREROOM ISSUE SHEET - SESSION

ORGANIZATION: _____

SESSION DATE _____

PAPER

	TYPE OF PAPER	SERIAL NUMBER	NO. OF UNITS ISSUED	NO. OF UNITS RETURNED	NO. OF UNITS SOLD
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

INSTANTS

	DEAL NAME	FORM NUMBER	SERIAL NUMBER	ISSUED (Check if Yes)	RETURNED (Check if Yes)	SOLD (Check if Yes)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						